IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A DES MOINES, IA 50319 Fax: (515)281-4073 www.iowa.gov/ethics

Reset Form

Iowa Code section 8.7 requires all gifts and bequests given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

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Gift or Bequest information received

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Area Code & Telephone No.	Elimina ()	
CONTACT PERSON FOR RECIPIENT DEPARTMENT	FOR OFFICE:	
Meredith Baker		
Name		
Mailing Address (if different from above)	City, State, Zip (if different from above)	
meredith.baker@iowa.gov 712-542-6107		
Email Address Area Code & Telephone Number (if different from ab		

Clarinda, IA 51632

City, State, Zip Code

DONOR OF GIFT OR BEQUEST:

Anthony Bertolone

Clarinda Correctional Facility

Name of Department or Office 2000 n. 16th Street

Mailing Address

Name				
Mailing Address	City, State, Zip Code	03/29/1		\$10.00
Area Code & Telephone Nu	mber		ned as "fair marke	Amount/Value* t value" of item as determined by If no value mark "0.00".
Email Address (optional)				
Provide a description of the	gift or bequest and purpose thereof:			
"Assasins Creed" D'	VD for the CCF movie library.			
Criteria to use this form:				
	st that is received by any department of the	state or received by th	e Governor on bel	nalf of the state.

Statement of Affirmation:

I, Steve Weis	affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and
assessment of the fair market v	alue (if applicable) is correct and true to the best of my knowledge.

Sueis	03/29/17
Signature	Date